

State of California State
Water Resources Control Board
NOTICE OF INTENT
For Existing Facility Operators



3761

TO COMPLY WITH THE TERMS OF THE
GENERAL PERMIT TO DISCHARGE STORM WATER
ASSOCIATED WITH INDUSTRIAL ACTIVITY (WQ ORDER No. 97-03-DWQ)

This Notice of Intent (NOI) is being sent to all facility operators that were enrolled under the prior Industrial Storm Water General Permit that has now expired. A new General Permit has been adopted to replace the expired one. To enroll under the new General Permit, review this NOI (and make any necessary corrections), sign the CERTIFICATION on the reverse side, and return this original NOI within 45 days of receipt to: STORM WATER NOI PROCESSING UNIT, STATE WATER RESOURCES CONTROL BOARD, PO BOX 1977, SACRAMENTO, CA 95812-1977

FACILITY OPERATOR INFORMATION:**WDID:** 4B19S003226**NAME:** MACLEOD METALS**CONTACT & PHONE****STREET:** 9309 RAYO AVEWILLIAM LAMBERT
(213) 567-7767**CITY, STATE, ZIP:** SOUTH GATE, CA 90280**FACILITY LOCATION:**

County: Los Angeles

NAME: MACLEOD METALS**CONTACT & PHONE****STREET:** 9309 RAYO AVEWILLIAM LAMBERT
(213) 567-7767**CITY, STATE, ZIP:** SOUTH GATE, CA 90280**FACILITY MAILING ADDRESS:** (IF DIFFERENT THAN FACILITY LOCATION)**STREET OR POST OFFICE BOX:** _____**CITY, STATE, ZIP:** _____**ADDRESS FOR CORRESPONDENCE - SEND TO:** (CHECK ONE)☐ Facility Operator Address ☒ Facility Mailing Address ☐ Both**BILLING ADDRESS INFORMATION - SEND TO:** (CHECK ONE)☒ Facility Operator Address ☐ Facility Mailing Address ☐ Other (enter below)**NAME:** MACLEOD METALS**STREET:** 9309 RAYO AVE.**CITY, STATE, ZIP:** SOUTH GATE, CA 90280**CONTACT PERSON:** WILLIAM LAMBERT **PHONE:** 213-567-7767**SIC(S) OF REGULATED ACTIVITY:**

5093 Scrap & Waste Materials

CERTIFICATION:

WDID: 4B19S003226

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. In addition, I certify that the provisions of the permit, including the development of and implementation of a Storm Water Pollution Prevention Plan and a Monitoring Program Plan, will be complied with."

Printed Name: WILLIAM LAMBERT

Signature: William Lambert Date: May 14, 1987

Title: PLANT MANAGER

WILLIAM LAMBERT
MACLEOD METALS
9309 RAYO AVE
SOUTH GATE, CA 90280

For State Water Board Use